

EXHIBIT I

MENTAL HEALTH EVALUATION FOR THE BOARD OF PRISON TERMS
(REVISED AUGUST 1998)
PAROLE CONSIDERATION HEARING
APRIL 2002 LIFER CALENDAR

CORRECTIONAL TRAINING FACILITY, SOLEDAD
FEBRUARY 1, 2002

This is the second mental health evaluation for the Board of Prison Terms on inmate Juan Manuel Chavez, CDC# H-74168. This report is the product of a personal interview, conducted on 02/01/02, as well as a review of his Central file and unit health record. This interview was a single contact with this individual for the sole purpose of preparing this report.

PSYCHOSOCIAL ASSESSMENT

I. IDENTIFYING INFORMATION:

Inmate Chavez is a 33-year-old, divorced, Mexican male. His date of birth is 07/03/68. He stated that he considers himself a Christian, but did not state any specific denomination. He described himself as more "spiritual" in nature. He presented with no unusual physical characteristics, and stated that he often goes by an abbreviation of his middle name, "Manny".

II. DEVELOPMENTAL HISTORY:

Inmate Chavez denied any history of birth defects or abnormalities of developmental milestones. He denied a history of cruelty to animals, enuresis, acts of arson, or any significant childhood medical history. He also denied any childhood history of physical or sexual abuse as either a perpetrator or a victim.

III. EDUCATIONAL HISTORY:

Inmate Chavez completed the tenth grade. He reportedly dropped out of school in the 11th grade, and explained that he was bored with school at that time. He completed his GED prior to his incarceration through a joint diversion program. He denied any history of special education. The inmate explained that, since

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his incarceration, he was certified while at Pleasant Valley State Prison (PVSP) to teach literary classes. He said he continues to teach people on an individual basis. He also explained that, educationally, he has assisted teaching in infectious disease classes.

IV. FAMILY HISTORY:

Inmate Chavez explained that his biological father died before he was born. His mother married when he was approximately 13 years old, and the inmate then resided with his mother and stepfather. His mother is approximately 52 years old and suffers from diabetes and heart problems.

The inmate stated that he has two brothers and one sister. He denied any awareness of drug or alcohol problems, or mental illness with his parents. He explained that all of his siblings drank alcohol, but reported that his siblings have no legal problems or what he considers to be substance abuse issues related to their drinking.

He still communicates with his mother and siblings on a regular basis. They reside in Southern California.

V. PSYCHOSEXUAL DEVELOPMENT AND SEXUAL ORIENTATION:

Inmate Chavez stated that he is a heterosexual male. He denied any history of high-risk sexual behavior, including sexual aggression.

VI. MARITAL HISTORY:

Inmate Chavez has been married one time, in what he called a common-law marriage. He explained that he started living with his ex-wife at the age of 18, and lived with her for six and a half years, until his incarceration for this offense. He has three children with this woman. He has one son with another woman. Asked to describe his relationship with his ex-wife, he stated that, after four years, he realized he was too young when he married. At that time, he said, "I started running around." The inmate explained that he still keeps in contact with all four of his children on a regular basis.

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The inmate is currently involved in a relationship, and is, in fact, engaged to this woman. He explained that he met her through a friend and has hopes to marry one day if paroled.

VII. MILITARY HISTORY:

Inmate Chavez denied any history of military service.

VIII. EMPLOYMENT/INCOME HISTORY:

Prior to his incarceration, inmate Chavez appears to have had an extensive employment history. He said he started working at about eight years old, selling oranges door to door. He added that one of the reasons he started working at such a young age was that his mother was a single parent, and that he felt he wanted to keep busy and earn some of his own money. At about age 12, he explained that he worked in a butcher store after school and on weekends. This was followed by working for a fast-food restaurant until he was 18. His next job was working for a roofing union. He held this job for about three and a half years. His last jobs prior to his incarceration were working with engine rebuilding, and as a freelance person for a security office. He worked these two jobs at the same time.

Since his incarceration within CDC, he has worked in textiles, as a barber, on the yard crew, as a cook, and as a porter. He was enrolled in vocational welding. He is currently working as a painter.

Outside of work, the inmate explained that he likes sports, and also likes to spend time drawing cartoon characters.

IX. SUBSTANCE ABUSE HISTORY:

When asked to describe any substance use history, inmate Chavez explained, "I am a recovered alcoholic." He explained that he started drinking beer at approximately age 12, and the frequency of use progressed. He explained that he rarely drank hard liquor.

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He sometimes drank to the point of blacking out. He denied any treatment for alcohol abuse problems prior to his incarceration. He did add that, since his incarceration, although he has had many opportunities to use pruno, he has always declined. He also admitted to being what he termed "addicted" to cocaine for about one year prior to his incarceration. He admitted to experimenting with PCP several times and LSD one time. He explained that he smoked marijuana occasionally prior to his incarceration to assist with sleep.

Since his incarceration, he has been involved in Alcoholics Anonymous since about 1994. He explained that now he goes to AA occasionally, oftentimes unable to go to meetings due to lockdowns. He has also been involved in Narcotics Anonymous and described his involvement there as "from time to time."

He has been involved in a variety of self-help programs, including Bible study courses and a Parenting class. He explained that he has been a chairman for AA, and also started a Lifers' support group at Pleasant Valley State Prison. Additionally, he was involved in the Impact program, which is a program dealing with victims' concerns.

X. PSYCHIATRIC AND MEDICAL HISTORY:

Inmate Chavez explained that he is currently waiting for knee surgery due to a basketball injury. He denied any other medical history or problems. He is currently not taking any medication.

He does appear to have a minor psychiatric history, although the inmate denied any psychiatric history himself. Apparently, in 1995, he made a suicidal gesture and was hospitalized. He explained that he was not actually feeling suicidal, but it was due solely to an enemy situation. He added that since officers did not remove him from a yard where he felt his life was at risk, he knew he had to take a more drastic effort to get attention, and made a cut on his wrist to get the attention and subsequent removal from the yard. He denied being depressed at the time. He denied ever

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taking psychotropic medication or being hospitalized for any psychiatric problems. The inmate stated that, like many other inmates, he has had times when he has felt "lonely, sad and alone," due mostly to being incarcerated. He denied ever feeling significantly depressed or suicidal.

He denied a history of serious accidents or head injuries, or a history of seizures or other neurological conditions.

XI. PLANS IF GRANTED RELEASE:

Inmate Chavez explained that he hopes to live with his fiancée in the Salinas area if paroled. He wants to avoid the Southern California area, in part because friends of the victim of his commitment offense still reside in that area. The inmate explained that his fiancée has two jobs and owns her own home, and has agreed to help in any transition from prison to the community.

He added that, since he is aware of his substance use problems in the past, he plans to stay involved in Alcoholics Anonymous or other programs that address substance use. He explained that his fiancée does not have any past or current problems with alcohol or drug abuse. He hopes to work ideally as a welder or as a roofer, since he is skilled in both these areas. He explained that he will do whatever it takes, however, to get to a point of being more self-sufficient.

CLINICAL ASSESSMENT

XII. CURRENT MENTAL STATUS/TREATMENT NEEDS:

Inmate Chavez is a 33-year-old, divorced, Mexican male. He appeared to be his stated age. He was appropriately dressed and groomed. He was coherent, cooperative, calm and alert throughout the interview. His speech, flow of thought and affect were all within normal the normal range. His intellectual functioning was

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estimated to be within the average range. There was no evidence of a mood or thought disorder. A past diagnosis from a psychiatric report in 1996 for the Board of Prison Terms indicated an adjustment disorder with depressed mood. This appears to be resolved at this time. His judgment appeared to be sound. He demonstrated what seems to be, based on past reports, improved insight into his commitment offense.

CURRENT DIAGNOSTIC IMPRESSIONS:

AXIS I: Polysubstance Dependence, in institutional remission.
AXIS II: Antisocial Personality Disorder, improving.
AXIS III: Injured knee.
AXIS IV: Incarceration. Some enemy concerns within prison.
AXIS V: Current GAF = 80.

His prognosis is positive for being able to maintain his current mental status in the community upon parole.

XIII. REVIEW OF LIFE CRIME:

Inmate Chavez described the circumstances surrounding his commitment offense. The description was similar to that given in his Central file. He is serving a 15 year to life sentence for Second Degree Murder.

His crime consisted of strangling to death a woman he reportedly encountered at a party that he had had a past relationship with. He admitted to being heavily intoxicated at the time of the crime. He had consumed both alcohol and cocaine prior to the event. He accepted responsibility and said, "It was a tragic accident. I take full responsibility." He admitted to not remembering much of the event due to being quite intoxicated. It is probable then that his diagnosed psychopathology was indirectly related to the crime. He appeared to be remorseful when discussing the victim.

Since inmate Chavez's incarceration, he has had zero CDC-115 violations. He has been incarcerated for about nine years. He has received four CDC counseling

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chronos for violations of lesser severity, none of which included violence.

The inmate admitted to "running with" a gang called "The Florance 13" gang. He denied being an active member of this gang. This was a Southern California gang. He denied being involved in any prison gangs since his incarceration.

He discussed his juvenile criminal record. His first offense was for running away from home. His next offense related to the use of PCP. He reported that he was sent to camp two times related to these offenses and was placed in a group home one other time as a juvenile.

As an adult, inmate Chavez was up on rape charges in 1988. The central file indicates that there was not sufficient evidence to convict him of this act. He denied those charges, and said that the woman was discovered to be not telling the truth about what actually happened. His next offense related to disorderly conduct, which was followed by one incident which dealt with being heavily intoxicated in public, after which he was sent to a diversion program in lieu of jail or prison time.

XIV. ASSESSMENT OF DANGEROUSNESS:

- A. A past psychological evaluation for the Board of Prison Terms discussed inmate Chavez's criminal history and describes him as someone "who has an extremely pathological sense of power." This clinician agrees that the inmate has a history of antisocial behavior, but disagrees with some aspects related to the discussed "extremely pathological sense of power." Such a person most likely would continue to have severe behavioral problems within even the restricted environment of prison. This inmate, on the other hand, has demonstrated in a slightly over nine year time within CDC to have been virtually disciplinary-free. It would appear then that he has made some gains psychologically, as compared to some of his

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behavior prior to his incarceration. It is this clinician's experience that individuals with severe antisocial problems prior to prison continue to have significant disciplinary behavior problems and infractions after their incarceration as well. Therefore, and in consideration of several factors, including his criminal history, his relative lack of significant CDC-115 violations, and gains made psychologically (partly related through involvement in self-help programs), his violence potential within a controlled setting is estimated to be average relative to this Level II inmate population.

- B. If released to the community, his violence potential is estimated to be slightly higher than the average citizen in the community.
- C. Clearly, the most significant risk factor which could be a precursor to violence for inmate Chavez would be continued abuse of alcohol and/or drugs. He minimizes somewhat his substance abuse issues. Therefore, should this man abuse substances again, his violence potential would be considered much higher than the average citizen in the community.

XV. CLINICIAN OBSERVATIONS/COMMENTS/RECOMMENDATIONS:

- A. This inmate is competent and responsible for his behavior. He has the capacity to abide by institutional standards and has generally done so during his incarceration period.
- B. This inmate does not have a mental health disorder which would necessitate treatment either during his incarceration period or following parole.
- C. As this man has acknowledged a significant past problem with alcohol and drugs, I would recommend upon parole:
 - 1) Abstinence from alcohol and all illegal drugs.
 - 2) Monitoring for substance abuse.

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- 3) Mandatory attendance at self-help groups that specifically address substance abuse issues, such as Alcoholics Anonymous or Narcotics Anonymous.
- 4) Continued efforts to seek self-knowledge and greater understanding of behavior patterns through self-help groups offered, and as available, within CDC.



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JH/gmj

D: 02/01/02
T: 02/04/02